

Testimony of Stephen R. Smith, M.D., M.P.H. on behalf of the National Physicians Alliance—Connecticut before the Public Health Committee on SB 425, an Act Concerning a Basic Health Program

My name is Stephen R. Smith, residing at 899 Montauk Avenue in New London. I serve as the director of physician outreach for the National Physician Alliance in Connecticut (NPA-CT) and submit this written testimony on behalf of the NPA-CT in support of the proposal to establish a State Basic Health Program (SBHP).

I am a family physician and practice at the Community Health Center in New London. Many of my patients fall into the category of persons who make between 133% and 200% of the federal poverty levels (FPL). Some are fortunate enough to be enrolled in Husky because they are the parents of children enrolled in Medicaid. Others are not so fortunate. My concern, and that of NPA-CT, is that without a State Basic Health Program, many more persons will find themselves in that unfortunate situation.

The reason for this is that if the state does not adopt the SBHP, all those adults between 133% and 200% of the FPL will be forced to purchase health insurance through the exchange. Although federal subsidies will be used to lower the cost of purchasing private health insurance, these families will have to pay insurance premiums which they may simply not be able to afford. As a result, it is estimated that half of the persons in this income bracket will end up uninsured.

I see the harmful consequences of this every day in my practice among those low-income adults who are not in Husky. I have patients with out-of-control diabetes who skimp on their insulin, thus putting their very limbs at risk. I see patients with high blood pressure who don't fill their prescriptions because they can't afford them, placing themselves at high risk for a stroke or heart attack. I observe patients not coming in for preventive care because they can't afford the copayments, thereby foregoing the opportunity to catch disease early or preventing disease altogether.

Not enacting the SBHP would make the current situation worse. By creating a SBHP that replicates the current coverage of Medicaid, the state will maintain and even expand the pool of adults between 133% and 200% of FPL who have adequate health insurance. And the state can do so in a revenue-neutral way.

Without a SBHP, thousands of currently insured individuals will become uninsured. Their health will suffer as a consequence. That's not an opinion—that's fact based on scientific research. Emergency rooms will continue to be overused and misused as a provider of last resort. Connecticut will have taken a giant step backward.

The legislature should act now to avert such a catastrophe by enacting a SBHP now. NPA-CT urges positive action on RB 5450 in this session.